	Complete if Known
FEE TRANSMITTAL *Effective on 12/08/2004.* *Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).*	
Application Number	10/700,551-Conf. #006092
For FY 2005	
Filing Date	November 5, 2003
First Named Inventor	Sang-Ho LEE
Examiner Name	C. H. Sam
☐ Applicant claims small entity status. See 37 CFR 1.27	Art Unit	3731
TOTAL AMOUNT OF PAYMENT ($) 100.00	Attorney Docket No.	4515-0103P

METHOD OF PAYMENT (check all that apply)

[x] Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, **except for the filing fee**

[x] Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17

[x] Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	**Fee ($)**	**Small Entity Fee ($)**	**Fee ($)**	**Small Entity Fee ($)**	**Fee ($)**	**Small Entity Fee ($)**	**Fees Paid ($)**
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims		Extra Claims	Fee ($)		Fee Paid ($)	Multiple Dependent Claims	
5	- 20 =	0	x 25.00	=	_____	Fee ($)	Fee Paid ($)

Indep. Claims		Extra Claims	Fee ($)		Fee Paid ($)
4	- 3 =	1	x 100.00	=	100.00

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).
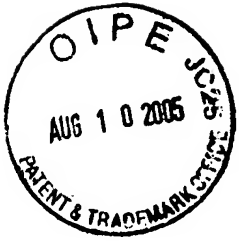
Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee ($)		Fee Paid ($)
_____	- 100 =	_____	/50	_____ (round up to a whole number) x	_____	=	_____

4. OTHER FEE(S)

Fees Paid ($)

Non-English Specification, $130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY				
Signature	*[signature]*	Registration No. (Attorney/Agent)	39,538	Telephone	(703) 205-8000
Name (Print/Type)	James T. Eller, Jr.			Date	August 10, 2005

IN THE U.S. PATENT AND TRADEMARK OFFICE

Applicant:	Sang-Ho LEE	Conf. No.:	6092
Appl. No.:	10/700,551	Group:	3731
Filed:	November 5, 2003	Examiner:	C.H. Sam
For:	DISPOSABLE SURGICAL SCALPEL		

AMENDMENT UNDER 37 CFR §1.111

MS FEE AMENDMENT
Commissioner for Patents   **August 10, 2005**
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Examiner's Office Action dated March 11, 2005, the period for response having been extended two months until August 11, 2005, the following amendments and remarks are respectfully submitted in connection with the above-identified application.